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**** CONTINUING DATA *******
 This appln claims benefit of 60/471,387 05/16/2003 *Col*

**** FOREIGN APPLICATIONS *******
None Col

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 12/01/2003

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>Col</i>	STATE OR COUNTRY MI	SHEETS DRAWING 10	TOTAL CLAIMS 19	INDEPENDENT CLAIMS 6
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Verified and Acknowledged
 Examiner's Signature _____ Initials _____

ADDRESS
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TITLE
 Tri-level inverter

FILING FEE RECEIVED 1158	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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